

PHA Name:
HA Code:

Streamlined Annual Plan for Fiscal Year 20__

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Housing Authority of Racine County			Grant Type and Number Capital Fund Program Grant No: WI139P183501-06 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 2006 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	15,847		15,847	15,857
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	15,847		15,847	15,847
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

**Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages**

[illegible]

[illegible]

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report				
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I:				
PHA Name: Housing Authority of Racine County			Grant Type and Number Capital Fund Program Grant No: WI139P183501-05 Replacement Housing Factor Grant No:	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 2005 <input type="checkbox"/> Final Performance and Evaluation Report				
Line No.	Summary by Development Account	Total Estimated Cost		Ob
		Original	Revised	
1	Total non-CFP Funds			
2	1406 Operations	12,181	17,401	17,401
3	1408 Management Improvements	3,480	0	
4	1410 Administration	1,740	0	
5	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs			
8	1440 Site Acquisition			
9	1450 Site Improvement			
10	1460 Dwelling Structures			
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Nondwelling Structures			
13	1475 Nondwelling Equipment			
14	1485 Demolition			
15	1490 Replacement Reserve			
16	1492 Moving to Work Demonstration			
17	1495.1 Relocation Costs			
18	1499 Development Activities			
19	1501 Collateralization or Debt Service			
20	1502 Contingency			
21	Amount of Annual Grant: (sum of lines 2 – 20)	17,401	17,401	17,401
22	Amount of line 21 Related to LBP Activities			
23	Amount of line 21 Related to Section 504 compliance			
24	Amount of line 21 Related to Security – Soft Costs			
25	Amount of Line 21 Related to Security – Hard Costs			
26	Amount of line 21 Related to Energy Conservation Measures			

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages					
PHA Name: Housing Authority of Racine County		Grant Type and Number Capital Fund Program Grant No: WI139P183501-05 Replacement Housing Factor Grant No:			Federal FY of
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost	Total A

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

				Original	Revised	Funds Obligated
HA-Wide	1406 Operations			12,181	17,401	17,401
	1408 Management			3,480		
	1410 Administration			1,740		

**Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/
Part III: Implementation Schedule**

PHA Name: Housing Authority of Racine County			Grant Type and Number Capital Fund Program No: W1139P183501-05 Replacement Housing Factor No:				Federal
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason
	Original	Revised	Actual	Original	Revised	Actual	
HA-Wide	6/30/06		9/30/06	12/31/06		9/30/06	

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**Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/
Part III: Implementation Schedule**

PHA Name: Housing Authority of Racine County		Grant Type and Number Capital Fund Program No: WI139P183501-05 Replacement Housing Factor No:					Federal
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reason
	Original	Revised	Actual	Original	Revised	Actual	